

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	MM	572	08-13-01
RESPONSE FORMALITY REVIEW	tpl	1030	11-13-01

INDEX OF CLAIMS

✓ _____ Rejected N _____ Non-elected
 □ _____ Allowed I _____ Interference
 - (Through numerals) _____ Canceled A _____ Appeal
 + _____ Restricted O _____ Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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5-300

08/17/01

R61

11-13-01